

# **Division for Behavioral Health RFI Respondent Meeting**

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## **Statewide Mobile Crisis Response Teams**

November 18, 2019 from 1:00pm – 4:00pm

Department of Health and Human Services

129 Pleasant Street, Brown Building Auditorium



# Agenda

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Welcome and overview of the meeting	15 min
Vision and review of the RFI	30 min
Next steps	15 min
Questions and answers	90 min



# Coordinated and Integrated Crisis Response System

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## VISION

New Hampshire seeks to develop a new statewide model for integrated crisis services that is responsive to children and adults experiencing a behavioral health crisis.

The new crisis response system will:

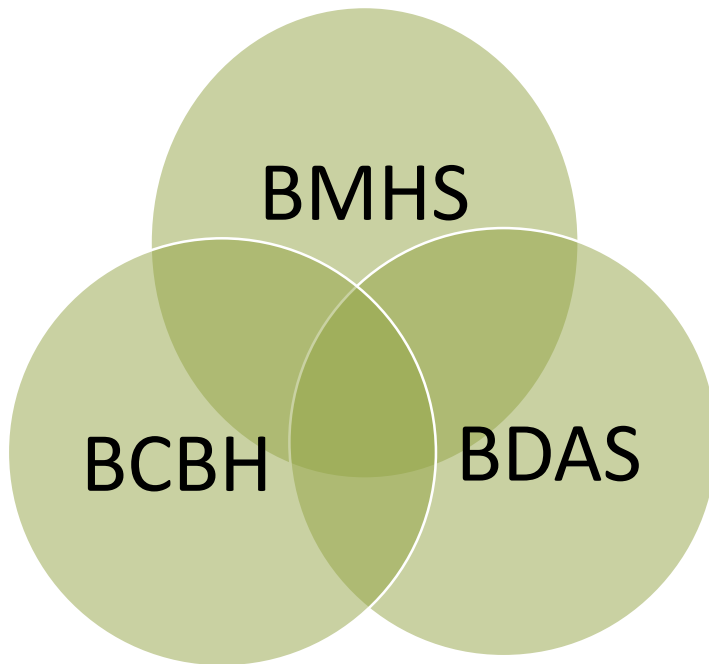
- ✓ Ensure timely access to mobile crisis response services statewide
- ✓ Be integrated with current emergency services to create a well-coordinated continuum of behavioral health crisis response services
- ✓ Be efficient and sustainable

Source: RFI page 2



# Coordinated and Integrated Crisis Response System

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## Division for Behavioral Health (DBH) Current System Drivers:

- **Bureau for Children's Behavioral Health**
  - Focus: Prevention, early identification & intervention, Senate Bill 14, 10 Year Plan
- **Bureau of Mental Health Services**
  - Focus: Diversion and access for SMI, SPMI & co-occurring disorders, CMHA, 10 Year Plan
- **Bureau of Drug and Alcohol Services**
  - Focus: Unmet treatment needs in opioid crisis and MAT. Doorway system (SOR), 10 Year Plan

Source: RFI page 4



# Current Mental Health Crisis Response System

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## Emergency Services

All 10 Community Mental Health Regions  
State Fiscal Year 2019  
(July 1, 2018 – June 30, 2019)

# Emergency Services for Adults = 62,456

# Emergency Services for Children = 18,177

Source: Phoenix, retrieved on 11/7/2019

## Adult Behavioral Health Crisis Treatment Center

Riverbend  
Opened in May, 2019

## Adult Mobile Crisis Teams & Apartments

(Riverbend, Manchester, & Nashua)  
State Fiscal Year 2019  
(July 1, 2018 – June 30, 2019)

# of calls for Phone Support or Triage: 12,677

# of Mobile Community Assessments: 3,459

# of Crisis Apartment Admissions: 628

# of Hospital Diversions: 10,654

Source: CMHA Quarterly Report: April 2019 &  
September 2019

\*Numbers include duplicated counts of individuals



# Current Substance Use Disorder Crisis Response System

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## 211 Information and Referral

Statewide 24/7 access to SUD information & referral to services & supports

## OUD Mobile Crisis Response

Manchester  
Opened in August, 2019

## The Doorways

Statewide coverage through regional Doorways - 24/7 access to SUD information, screening & evaluation, and referral to treatment, prevention, & recovery services

## Respite Housing

Short-term supported recovery housing for adults with OUD



# Current Crisis Response System

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Current challenges to meet the needs of children and adults who are experiencing a behavioral health crisis.

## Challenges:

- Crisis response services are not integrated to meet the needs of adults and children experiencing a mental health and/or substance misuse crisis
- Mobile Crisis teams were established to meet terms of the CMHA so are localized and funding is limited to adults with primary mental illness
- Mobile crisis teams are not designed to address substance use or children's mental health
- Crisis apartment access is limited by region due to lack of transportation, standardized emergency assessments, and interoperability between EHR systems
- Payment and funding models to sustain crisis services are limited
- Lack of integration between emergency services, mobile crisis response, crisis treatment center and other children's and substance misuse services results in workforce capacity issues - limited ability to recruit, hire, and sustain positions that serve diverse populations across behavioral health



# DBH Envisions an Integrated Statewide Crisis Response System

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## Goals of Department:

1. Develop an efficient and sustainable statewide crisis response model to serve adults and children with behavioral health needs
2. Ensure that integrated mobile crisis response teams are available in every region of the state
3. Decrease the use of hospital admissions and engage people in appropriate levels of care
4. Support a crisis system that is responsive to the needs of individuals and families affected by behavioral health conditions
5. Utilize the best clinical practices and evidence-based services
6. Establish sustainable funding and staffing for crisis response models
7. Engage stakeholders in the identification of specific needs such as geographic needs, funding models, and cultural competencies

Source: DBH RFI, page 5





# Vision: Coordinated and Integrated Crisis Response System

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<b>Current state</b>	The current emergency services teams are not fully integrated with MCRT or BHCTC but do serve adults and children. Current mobile crisis teams are localized in three highly populated catchment areas, dedicated to adults with primary mental illness with the option of crisis apartments.
<b>Vision</b>	Future crisis response system is integrated to effectively respond to all individuals experiencing behavioral health emergencies regardless of age or location. A fully integrated continuum of crisis response services will be available to all individuals, in all regions, and follow best practices.
<b>What we ask</b>	Information to develop new models for the statewide expansion and integration of mobile crisis response teams and an integrated crisis response system throughout NH; including lessons learned, recommended approaches for future models, and sustainable funding models.
<b>Changes to the system</b>	Uniform statewide coverage, integrated behavioral health mobile crisis response teams, integrated continuum of crisis response services, increased access to a continuum of care for all, different funding model(s). Establish consistent core services and models that account for regional differences.



# Responses to the RFI are due on January 6th

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	October	November	December	January 2020
Question period & respondent meeting	Respondents Meeting (non-required) 11/18/2019			
	Question Period Closes 11/20/2019			
FAQ drafting & posting	Response to Questions Posted 12/3/2019			
RFI response drafting & due date	RFI Submissions Due 1/6/2020 at 3 PM			

From FAQ posted to RFI responses due:  
Approximately 4 ½ weeks



# Submissions should be made by e-mail and should contain four pieces of information

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Submissions can **only be made by email**. Email your responses to:

- **To** - [DHHS-contracts@dhhs.nh.gov](mailto:DHHS-contracts@dhhs.nh.gov)
- **cc'd** – [ami.carvotta@dhhs.nh.gov](mailto:ami.carvotta@dhhs.nh.gov)

Responses are due by **3:00 pm EST on January 6, 2020**

**We encourage both collaborative responses** (e.g., multiple organizations or people submitting together) **and individual responses by one organization/person.**

In your submission, please include:

1. **The transmittal cover letter**, including your name, title, telephone number and e-mail address.
2. **Table of contents**, including the contents listed here and their corresponding page numbers.
3. **Executive summary**: an overview of the Respondent's organization and which demonstrates the respondents understanding and reason for responding.
4. **Answers to the RFI**, which can include a response for all or some of the questions asked in the RFI. You do not have to respond to every question.



# Submissions are due on January 6, 2020

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DHHS and DBH will review all responses  
and use them to shape next steps

**Review  
submissions**

**Synthesize  
submissions**

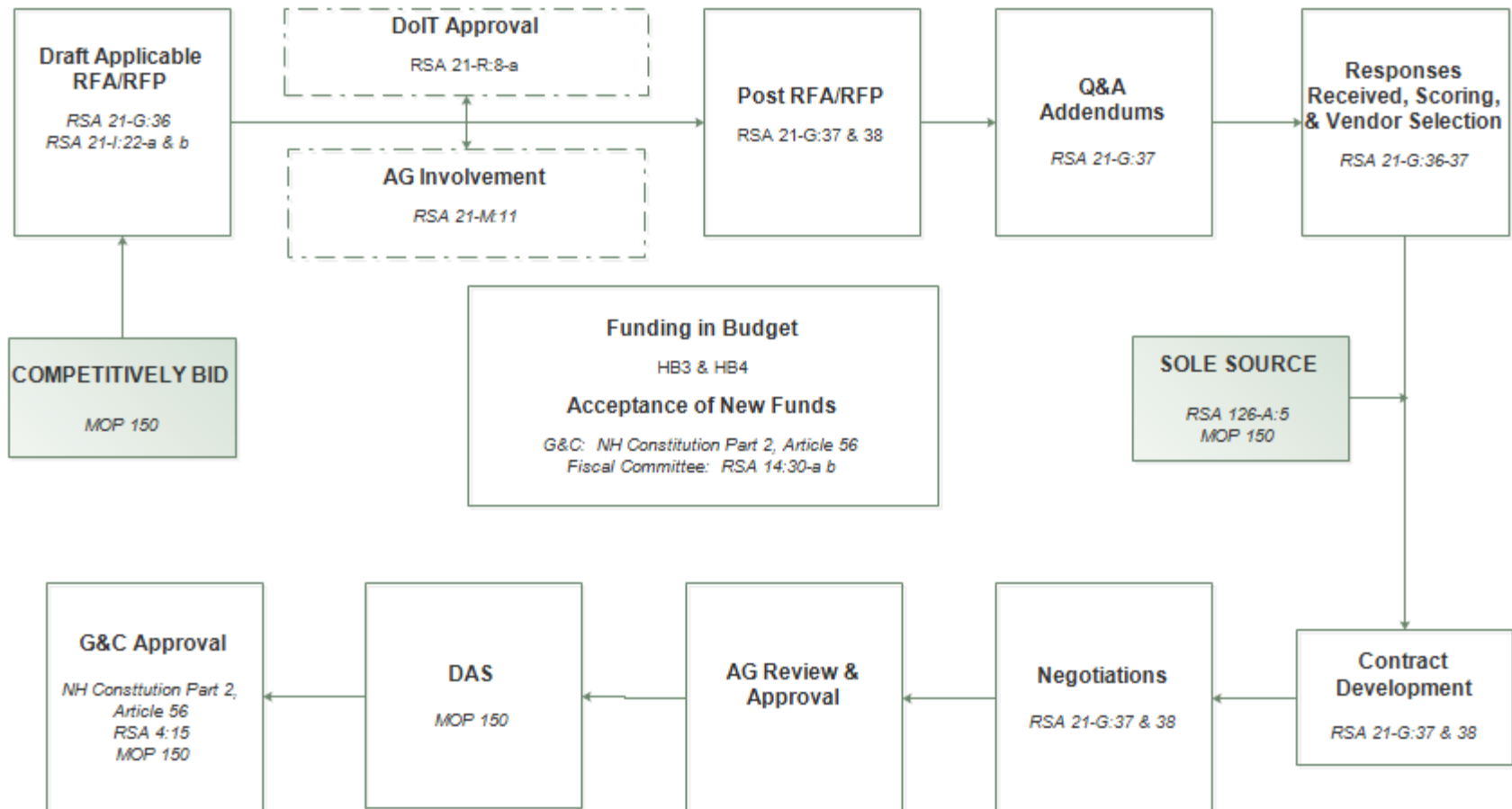
**Develop  
procurements**

**Share back  
insights**



# Single Agency Contracting Process

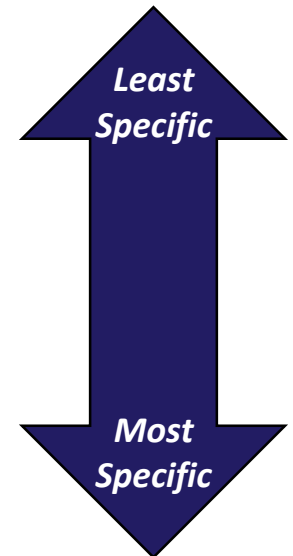
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# DHHS Solicitation Tools

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Name	Use
<b>Request for Proposal</b>	Vendor proposes goods or services and the price.
<b>Request for Bid</b>	DHHS specifies the goods or services, vendor proposes price.
<b>Request for Application</b>	DHHS defines the goods or services sought and the amount of funding available.



# Question and Answer Session

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